WASHINGTON FARMLINK

NEW FARM OPERATOR Enrollment Form

Complete this form and send to:

Washington FarmLink * 300 19th Avenue * Seattle, WA 98122 Telehphone: (206) 205-6372 or Toll-Free: (877) 728-9453

For both the applicant and co-applicant/spouse, please answer the following by checking all answers that apply, and completing the descriptions. Please print in ink or type. For some questions, you may choose to check several answers. Use additional pages for your answers if the spaces provided are not sufficient. A summary of this information will be available to individuals interested in this program, with the complete application available to landowners upon specific request.

SECTION I: GENERAL INFORMATION

Applicant:
Anticipated role:
Co-Applicant/Spouse:
Anticipated role:
Home Address:
City, State, Zip:
Telephone: <u>day () evening () email:</u>
Education: (indicate levels completed & degrees; if applicable, any agricultural training)
What types of additional training would be helpful to you in your agricultural operation? (computer, farm management, finances, mechanics, etc.)
Describe your current occupation(s) and responsibilities. If you are currently farming, please state the size, type(s), and location of the operation. Will you and/or your spouse continue your current occupation(s)?
Have you had any agricultural employment and/or experience? If yes, please describe.

SECTION II: AGRICULTURAL INTERESTS

County/counties of	Washington in which	ch you are interes	ted:			
≥≥ Adams	≥≥ Douglas	∞∞ King	∠ Pacific	∠∠ Stevens		
≪≪ Asotin	≪ Ferrv	≪≪ Kitsap	∠ Pend Oreille	≥≥ Thurston		
≥≥ Benton	zz Franklin	∠∠ Kittitas	∠∠ Pierce	zz Wahkiakum		
∠∠ Chelan	EE Franklin EE Garfield EE Grant EE Grays Harbor		∠∠ San Juan	≪≪ Walla Walla		
∠∠ Clallam	zz Grant	∠∠ Lewis	≪≪ Skagit			
∞∞ Clark	∠∠ Grays Harbor	∞∞ Lincoln	∠∠ Skamania	∠∠ Whitman		
∠∠ Columbia	∡≤ Island	≪≪ Mason	≥≤ Snohomish	zz Yakima		
	≥≥ Jefferson					
Type of agricultura	al operation(s) interes	sted in:				
≥ Aquaculture	≥≥ Beef	∠ Berries	≥≥ Dairy	∞∞ Grain		
∞∞ Herbs	∠∠ Hogs	∠∠ Horses	∠∠ Horticulture	zz Nursery		
∠ Nuts	∠ Orchard/Fruit	∠∠ Poultry	≪ Sheep	≤≤ Turf		
∠ ∠ ∠ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓ ✓	≥≥ Beef ≥≥ Hogs ≥≥ Orchard/Fruit ≥≥ Vineyard					
≥≥ Other:						
Are you interested	in organic farming?	YES	N	O		
Acreage desired:						
	11-10	0	_100-+			
			_			
Please indicate whi	ch of the following	resources that you	are able to contrib	oute to a FarmLink match.		
Labor	Monogoment		Machinery	. Livestock		
∠∠ Labor	∠ Management Frankling Fra	Æ A	✓ Machinery	ZZ Livestock		
& Capital	∠ Family/spouse	assistance &	∠ OII-Iarm income			
zz Omer.						
Describe your hous	sing needs:					
	SEC	TION III: TR	<u>ANSACTION</u>			
TD 61 :		1 1 .				
	rrangement(s) you m					
Lease Lease with an option to purchase Buy Other:						
Employee/	Employer (working	agreement with fu	iture transfer)			
				e during the transition of a		
farm business? Ple	ease explain:					
TT 1 1		211 . 1 . 0				
How long do you anticipate this transfer will take?						
Minimum	yrs/months	Maximi	umyr	rs/months		
T. C			1/ 1 10			
	nce needed in purcha	ising an operation	and/or land?			
YES	NO					

How did you learn about Farn Internet		
Word-of-mouth	WSU Cooperative ExtensionOtherOther	
	ural organizations? If yes, please listYES:	
	SECTION IV: COMMENTS	
What are your plans/goals for Short-term (1-5 years):	a farm business?	
Long-term (over 5 years):		
	you, your property, or your operations that you would like a potential link to share the information in the space below (feel free to also attach any your interest in FarmLink).	-
Please check which of the foll	owing resources that would assist you with the transfer process:	
EZ Access to Capital EZ Access to Farm Lands by L EZ Apprenticeships	Conflict Resolution & Negotiation Estate Planning Farm Planning and Management Estate Real Estate	
	function is to gather and distribute information. It does not guarantee the ollected, the distribution of the information collected, or the matching of ard a legal agreement.	
	tements made by me are true and accurate to the best of my knowledge and faith for the purpose of participating in the FarmLink Program.	
	permission to release my name, address, phone number and any other questionnaire to persons who are interested in discussing a possible business	
Applicant signature:		
	Mail completed form to: Washington FarmLink 300 19 th Avenue Seattle, WA 98122 Or fax to: 206-517-9953	